

INCIDENT REPORT FORM

TO: GENERAL SUPERVISOR

CC: FACTORY MANAGER
SAFETY DIRECTOR
SUPERINTENDENT

SUBJECT: HAZARDOUS WASTE DRAINED INTO METRO

AFFECTED SHOP: A3155 DATE: 1-10-88

AFFECTED AIRPLANE: _____ TIME: 9:00 AM

1. WHAT OCCURRED: APPROX. 900 GALLONS OF (SODIUM
HYDROXIDE, SODIUM SULFIDE, TRIETHANOLAMINE) SOLUTION
WAS DRAINED INTO METRO JEWEL SYSTEM. FROM
TANK #5. PLUMBERS LEFT DRAIN OPEN
WHILE PLACING SOLUTION INTO TANK.

2. ACTION TAKEN: CONTACTED MAINTENANCE DISPATCH
AND DONE IN MARSHALL SUPERVISOR OF
PLUMBERS.

3. AFFECT ON SCHEDULES: _____

4. WOULD THE CONDITION BE SIMILAR ON OTHER AIRPLANES? _____

5. THIS INFORMATION HAS BEEN OBTAINED BY: _____

M. Cowley
SIGNATURE OF SUPERVISOR